Fee: \$75.00

## KOCHVILLE TOWNSHIP 5851 Mackinaw Road Saginaw, MI 48604 SPECIAL EVENT APPLICATION

Date of Applic	cation:			
Name of Spec	ial Event:			
Describe activ	rities to be held during the	e event:		
	_	-	e of company and phone numb application will be required)	er of the
•	or group sponsoring the S	•		
Address:				
Telephone Nu	mber:			
•	n responsible for the ever			
Address:				
Telephone Nu	mber:			
Proposed date	(s) of the event:			
Date:	beginning	am, ending	pm., hours of operation	hrs.
Date:	beginning	am, ending	pm., hours of operation	hrs.
Township Loc	eation of Special Event			
Busine	ess Name:			
Addres	ss:			

Continued on reverse

Provide a diagram which in Nearest roads	includes the following information	on:
Location of all exis	ting buildings.	
Location of entranc	ee and circulation drives and exis	sting parking.
Location and squar	e footage of proposed display/ter	nt area and distance from road.
Any Barricades, pe	rimeter/security fencing.	
Applicant's Signature		
******	******	*******
То	be completed by Kochville Tow	rnship personnel
Payment Received:  Date:  Receipt Number: _		
Receipt Number		Approval/Denial
יווי	ъ.	
Building:		
Zoning:	Date:	
Fire Dept:	Date:	